PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Dockel Number

Substitute for Form PTO-875									Аррис	Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
	FOR NUMBER FILED			אטא כ	BER EXTRA	RATE	FEC	7	RATE	555		
3ASIC FEE 37 CFR 1.18(a))			<u> </u>			\$	1	1000	FEE			
OTAL CLAIMS 37 CFR 1.16(c)) minus				minus	20 5			<u> </u>	OR	<u> </u>	\$	
NDEPENDENT CLAIMS 37 CFR 1.16(b))							X \$	- <del> </del>	OR	× \$	<del> </del>	
						X \$		OR	x \$	<del> </del>		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ 5		OR	+ \$ •		
If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL	<u></u>	OR	TOTAL		
	(	CLAIMS	AS AM	IENDE	D ~ PART II							
		(Colu	mn 1)		(Column 2)	(Column 3)	• • • • • • • • • • • • • • • • • • • •		OR	OTHE	R THAN	
AMENDMENT A	T		AIMS	<del></del>	HIGHEST	1 (Colonni 3)	SMALL	. ENTITY	1	SMALL	ENTITY	
		REMA AFT			NUMBER PREVIOUSLY	PRESENT EXTRA	ЭТАЯ	ADDI- TIONAL FEE		RATE	ADDI-	
	Total			ENT	PAID FOR						TIONA FEE	
	(37 CFR 1 16(c))	X		Minus	کلت		x 5_9.		OR	x s 18=		
	(37 CFR 1 16(b))		S	Minus		-	x s ## -		1	CO	<b></b>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+	OR	× 5_80 =		
				-	2011 COM (37 C	FR 1.16(0))	TOTAL	ļ	OR	+ 5=		
							ADD'L FEE		OR	TOTAL ADD'L FEE		
_		(Colun	nn 1)		(Column 2)	(Column 3)						
미		CLA REMA			HIGHEST NUMBER	PRESENT	RATE	400/				
ᆀ		AFT	ER		PREVIOUSLY	EXTRA	POATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT	Total (37 CFR 1 16(c))		MICITY	Minus	PAID FOR	=		FEE			FEE	
	Independent	<del>  .                                     </del>		Minus	•••	-	X \$=		OR	× 5 =		
	(37 CFR \ 16(b))				<u> </u>	1	x \$=	<u> </u>	OR	x s=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ 5 =		OR	+ 5 =		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	·	
		(Colum	in 1)		(Column 2)	(Column 3)	- ·		J.,		<del></del> -	
,		CLAI	MS		HIGHEST			<del>                                     </del>		T		
		REMAI		···	NUMBER _PREVIOUSLY_	PRESENT EXTRA	RATE	ADDI- IONAL		RATE	ADDI-	
<u>:</u>  -	Total	AMEND	MENT	Minus	PAID FOR	-		FEE			FEE	
	(A) CFR + 16(ch						x s =		OR	x \$=		
	Independent (37 CFR 1 16(b))	•		Minus		=	x s =		OR	x \$=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))											
_		· · · · · · · · · · · · · · · · · · ·					+ \$ =		OR	+ \$=		
					in column 2, write		ADD'L FEE		OR	ADD'L FEE		

If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'. \*\*\* If the 'Highest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments. on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office), U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.